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| Fill in this information to identify your case: | | |
|-------------------------------------------------|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| SOUTHERN DISTRICT OF OHIO | - | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | | |
|-----|-------------------------------------------------------------------------------------------------------------------|------------------------------------------|---|-----------------------------------------------|
| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on | Majid | | |
| | your government-issued picture identification (for example, your driver's | First name | _ | First name |
| | license or passport). | Middle name | _ | Middle name |
| | Bring your picture | Modarressi | | |
| | identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | _ | Last name and Suffix (Sr., Jr., II, III) |
| | | | | |
| 2. | All other names you have used in the last 8 years | | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-2299 | | |

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Case number (if known)

Debtor 1 Majid Modarressi

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 2935 Montana Ave #1 Cincinnati, OH 45211 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Hamilton County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Majid Modarressi

| Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 13 B. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in y about how you may pay. Typically, if you are paying the fee yourself, you man you may pay. Typically, if you are paying the fee yourself, you man you may pay a pre-printed address. I need to pay the fee in installments. If you choose this option only if you are filing for in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it we have you filed for bankruptcy within the last 8 years? No. No. Yes. | | | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|--|--|--|--|--|--|--|--|
| Chapter 7 Chapter 12 Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's office in y about how you may pay. Typically, if you are paying the fee yourself, you may pay with corder. If your attorney is submitting your payment on your behalf, your attorney may pay with corder. If your attorney is submitting your payment on your behalf, you rattorney may pay. The Filing Fee in Installments. If you choose this option, sign and attach the App The Filing Fee in Installments. (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for to but is not required to, waive your fee, and may do so only if your income is less than 150 applies to your family size and you are unable to pay the fee in installments). If you choose the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it we have you filed for bankruptcy within the last 8 years? B No. Sistrict When Case number No. So to line 12. Pobtor District When Case number No. Go to line 12. | | | | | | | | | |
| Chapter 12 | | | | | | | | | |
| Chapter 13 | | | | | | | | | |
| I will pay the entire fee when I file my petition. Please check with the clerk's office in y about how you may pay. Typically, if you are paying the fee yourself, you may pay with corder. If your attorney is submitting your payment on your behalf, your attorney may pay a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the App The Filling Fee in Installments. If you choose this option only if you are filing for Cloud to the Installments of Clicial Form 103A). I request that my fee be waived (You may request this option only if you are filing for Cloud to the Installments of the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it were bankruptcy within the last 8 years? No. | | | | | | | | | |
| about how you may pay. Typically, if you are paying the fee yourself, you may pay with corder. If your attorney is submitting your payment on your behalf, your attorney may pay in a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the App The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for CI but is not required to, waive your fee, and may do so only if your income is less than 150' applies to your family size and you are unable to pay the fee in installments). If you choose the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it was any one of the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it was a years? No. | | | | | | | | | |
| about how you may pay. Typically, if you are paying the fee yourself, you may pay with corder. If your attorney is submitting your payment on your behalf, your attorney may pay in a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the App The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for CI but is not required to, waive your fee, and may do so only if your income is less than 150' applies to your family size and you are unable to pay the fee in installments). If you choose the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it was any one of the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it was a years? No. | | | | | | | | | |
| The Filing Fee in Installments (Official Form 103A). request that my fee be waived (You may request this option only if you are filing for Cl but is not required to, waive your fee, and may do so only if your income is less than 150' applies to your family size and you are unable to pay the fee in installments). If you choos the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it were applied for bankruptcy within the last 8 years? No. | cash, cashier's check, or money | | | | | | | | |
| but is not required to, waive your fee, and may do so only if your income is less than 150' applies to your family size and you are unable to pay the fee in installments). If you choose the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it well ast 8 years? 9. Have you filed for bankruptcy within the last 8 years? No. Yes. District When Case number | oplication for Individuals to Pay | | | | | | | | |
| applies to your family size and you are unable to pay the fee in installments). If you choos the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it well. 9. Have you filed for bankruptcy within the last 8 years? No. | | | | | | | | | |
| 9. Have you filed for bankruptcy within the last 8 years? District When Case number District When Case number 10. Are any bankruptcy cases pending or being filed by a spouse who is not filling this case with you, or by a business partner, or by an affiliate? Debtor District When Case number No Pes. Pebtor Relationship to Debtor District When Case number The pebtor District When Case number Case number Relationship to Debtor District When Case number 11. Do you rent your residence? | ose this option, you must fill out | | | | | | | | |
| bankruptcy within the last 8 years? District When Case number District When Case number 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to District When Case number Debtor Relationship to District When Case number Debtor Case number The No. Go to line 12. | with your petition. | | | | | | | | |
| District When Case number District When Case number | | | | | | | | | |
| District When Case number 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to District When Case number Debtor Relationship to District When Case number Dist | | | | | | | | | |
| District When Case number 10. Are any bankruptcy cases pending or being filed by a spouse who is not filling this case with you, or by a business partner, or by an affiliate? Debtor Relationship to Debtor When Case number Debtor District When Case number Destrict When Case nu | ber | | | | | | | | |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor | ber | | | | | | | | |
| cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor District Debtor District When Case number Relationship t Relationship t Relationship t Relationship t Debtor District When Case number The provided Head of the provided | ber | | | | | | | | |
| filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor | | | | | | | | | |
| you, or by a business partner, or by an affiliate? Debtor Relationship t District When Case number Debtor Relationship t District When Case number Relationship t District When Case number Relationship t District When Case number | | | | | | | | | |
| District When Case number Debtor No. Go to line 12. District One when Case number When Case number Relationship to the case number of the case | | | | | | | | | |
| Debtor Relationship to District When Case number 11. Do you rent your residence? | to you | | | | | | | | |
| District When Case number 11. Do you rent your residence? No. Go to line 12. | er, if known | | | | | | | | |
| 11. Do you rent your No. Go to line 12. residence? | to you | | | | | | | | |
| residence? | er, if known | | | | | | | | |
| | | | | | | | | | |
| | stay in your residence? | | | | | | | | |
| ☐ No. Go to line 12. | | | | | | | | | |
| Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (For bankruptcy petition. | orm 101A) and file it with this | | | | | | | | |

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Debtor 1 Majid Modarressi Case number (if known)

| Part | Report About Any Bu | sinesses | You Own | n as a Sole Proprietor | | | | | |
|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | | | |
| | | ☐ Yes. | Name | e and location of business | | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | e of business, if any | | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | | per, Street, City, State & ZIP Code | | | | | |
| | it to this petition. | | | k the appropriate box to describe your business: | | | | | |
| | | | | Health Care Business (as defined in 11 U.S.C. § 101(27A)) | | | | | |
| | | | | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) | | | | | |
| | | | | Stockbroker (as defined in 11 U.S.C. § 101(53A)) | | | | | |
| | | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) | | | | | |
| | | | | None of the above | | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set ap deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, star operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the p in 11 U.S.C. 1116(1)(B). | | | | | | | |
| | For a definition of <i>small</i> | No. | No. I am not filing under Chapter 11. | | | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | | |
| | | ☐ Yes. | I am f | I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | | | |
| Part | 4: Report if You Own or | Have Any | Hazardo | ous Property or Any Property That Needs Immediate Attention | | | | | |
| 14. | Do you own or have any | ■ No. | | | | | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to | Yes. | What is | the hazard? | | | | | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | diate attention is , why is it needed? | | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? Number, Street, City, State & Zip Code | | | | | |
| | | | | | | | | | |

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Debtor 1 Majid Modarressi

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

| About Debtor 2 | (Spouse | Only in a | Joint | Case): |
|-----------------------|---------|-----------|-------|--------|
|-----------------------|---------|-----------|-------|--------|

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|------------------------------------------------------|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Majid Modarressi Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Majid Modarressi Signature of Debtor 2 Majid Modarressi Signature of Debtor 1 Executed on May 17, 2017 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Majid Modarressi Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Ryan J. | | Date | May 17, 2017 |
|--------------------|-----------------------------|---------------|-------------------------|
| Signature of | Attorney for Debtor | | MM / DD / YYYY |
| Ryan J. Re | eally | | |
| | eally, Attorney at Law, LLC | | |
| | nore 4th Floor | | |
| Cincinnati | , OH 45202 | | |
| Number, Street, | City, State & ZIP Code | | |
| Contact phone | 513-621-0999 | Email address | info@getreallylegal.com |
| 88257-KY/ | 0070496-OH/85352-FL | | |
| Day acceptage 0 Co | tata | | |

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| | | Docume | ent Page 8 of 51 | - |
|---------------------|-------------------------|-------------------|------------------|--------------------------------------|
| Fill in this inform | nation to identify your | case: | | |
| Debtor 1 | Majid Modarressi | i | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the: | SOUTHERN DISTRICT | OF OHIO | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| | | | | , |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your a Value o | ssets of what you own |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 60,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 4,962.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 64,962.00 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | i abilities It you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 124,770.67 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 8,769.86 |
| | Your total liabilities | \$ | 133,540.53 |
| Paı | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,286.62 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,189.42 |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other scl | hedules. |
| | ■ Yes What kind of debt do you have? | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--------------------------------------------------------------------------------------------------------------|
| | 122A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 Line 14. |

1,286.62 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|------------------------------------------------------------------------------------------------------------------------------|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | Case 1: | 17-bk-118 | 823 Doc 1 | | ed 05/ :umen | | | ntere 10 o | d 05/1 f 51 | .7/17 | 17:0 | 04:01 | Des | sc Main |
|------------------------|------------------------|-----------------------------------------------------------------|------------------------------------------|---------------------|-------------------------------|----------------------------|----------|---------------|----------------|----------------|-------------------|-----------------------------|--------|--------------------------------------------|
| -ill in | this information | on to identify | your case and th | | | | | 1 (7 (7 | .,, | | | | | |
| Debto | r 1 N | //ajid Modar | ressi | | | | | | | | | | | |
| S - I- 1 - | | irst Name | Middle | Name | | La | st Name |) | | | _ | | | |
| Oebto Spouse | _ | irst Name | Middle | Name | | La | st Name |) | | | - | | | |
| Inited | d States Bankru | ptcy Court for | the: SOUTHER | N DIST | RICT OF | OHIO | | | | | | | | |
| | | , | | | | | | | | | _ | | _ | |
| ase | number | | | | | | | | | | | | | Check if this is an amended filing |
| each | fits best. Be as | A/B: Pi ately list and d complete and a ice is needed, | _ | e. If two | married p | people are | e filing | togethe | r, both are | e equally | y respo | onsible for | supply | ring correct |
| art 1: | - | | uilding, Land, or Otl | ner Real | Estate Y | ou Own o | r Have | an Inte | est In | | | | | |
| Do y | | · · | quitable interest in a | | | | | | | | | | | - |
| | o. Go to Part 2. | | | • | | - | | - | | | | | | |
| _ | es. Where is the | . 0 | | | | | | | | | | | | |
| _ ' | es. Where is the | property: | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| .1 | | | | What | t is the pr | operty? C | heck all | that apply | | | | | | |
| _ | 2935 Montana | | - winding | | Single-fa | amily home | ie | | | | | | | or exemptions. Put |
| ٤ | treet address, if avai | lable, or other des | cription | ■ | - | or multi-un ninium or c | | - | | | | | | ims on Schedule D: ecured by Property. |
| _(| Cincinnati | ОН | 45211-0000 | | | ctured or n | nobile l | nome | | | ent val e prop | ue of the erty? | | urrent value of the ortion you own? |
| C | City | State | ZIP Code | | | ent proper | rty | | | | \$6 | 0,000.00 | - — | \$60,000.00 |
| | | | | | Timesha Other has an in | nterest in t | the pro | perty? | Check one | (suc a life | h as fe | | enancy | ownership interest by the entireties, o |
| | Hamilton | | | | Debtor 1 | • | | | | fee | | | | |
| _ | County | | | | Debtor 2 | 2 only 1 and Debt | tor 2 or | alv | | | | | | |
| | | | | | | one of the | | - | nother | | | if this is co tructions) | ommur | nity property |
| | | | | | | tion you w | | | out this ite | em, such | as lo | cal | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| . Ad | dd the dollar va | alue of the po attached for | ortion you own for Part 1. Write that | r all of y numbe | your enter here | ries fron | n Part | 1, incl | uding any | y entrie | s for | => | | \$60,000.00 |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Page 11 of 51
Case number (if known) Document Debtor 1 Majid Modarressi 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Mercedes-Benz Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: E-320 Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 1998 Year: Debtor 2 only Current value of the Current value of the 140,000 portion you own? Approximate mileage: Debtor 1 and Debtor 2 only entire property? Other information: At least one of the debtors and another \$1,292.00 \$1,292.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$1,292.00 .pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe..... Stove Refrigerator **Microwave** Washer & Dryer Dining room Family room \$1,330,00 **Bedroom** 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... (2) Televisions (1) Stereo \$800.00 (1) VCR/DVD 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe.....

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Official Form 106A/B Schedule A/B: Property page 2

Case 1:17-bk-11823

Doc 1

Case 1:17-bk-11823 Doc 1 Filed 05/17/17 Entered 05/17/17 17:04:01 Page 12 of 51
Case number (if known) Document Debtor 1 Majid Modarressi 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$300.00 Clothes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$100.00 jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,530.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

□ No

Cash

\$160.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

Yes.....

Institution name:

17.1. Checking 4704

Cincinnatus Savings & Loan

\$400.00

Case 1:17-bk-11823 Doc 1 Filed 05/17/17 Entered 05/17/17 17:04:01 Desc Mair Document Page 13 of 51

Case number (if known) Debtor 1 Majid Modarressi Checking 9813 **TruPartners Credit Union** \$50.00 17.2. **TruPartners Credit Union** \$30.00 Savings 9813 17.3. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No ■ Yes. Give specific information about them..... Name of entity: % of ownership: Architectural Realms Inc. Debtor is an architect and runs projects through 100 \$500.00 the corporation % 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No

Official Form 106A/B Schedule A/B: Property page 4

| Debtor 1 | | filed 05/17/17 ocument Pa | Entered 05/17/17 17:04:01 age 14 of 51 Case number (if known) | Desc Main |
|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| ☐ Ye | s. Give specific information about them | | | |
| Money o | or property owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | refunds owed to you s. Give specific information about them, including | whether you already | filed the returns and the tax years | |
| Exa ■ No | ly support nples: Past due or lump sum alimony, spousal sup s. Give specific information | oport, child support, r | naintenance, divorce settlement, property s | settlement |
| Exal | r amounts someone owes you mples: Unpaid wages, disability insurance paymen benefits; unpaid loans you made to someon s. Give specific information | | , sick pay, vacation pay, workers' compens | sation, Social Security |
| Exal ■ No | ests in insurance policies mples: Health, disability, or life insurance; health so s. Name the insurance company of each policy an Company name: | | s); credit, homeowner's, or renter's insuranc Beneficiary: | ce Surrender or refund value: |
| If yo som ■ No | interest in property that is due you from some of u are the beneficiary of a living trust, expect proces eone has died. S. Give specific information | | ance policy, or are currently entitled to recei | ve property because |
| Exa. ■ No | ns against third parties, whether or not you have mples: Accidents, employment disputes, insurance s. Describe each claim | ve filed a lawsuit or e claims, or rights to s | made a demand for payment sue | |
| ■ No | r contingent and unliquidated claims of every r s. Describe each claim | nature, including co | ounterclaims of the debtor and rights to s | set off claims |
| ■ No | financial assets you did not already list s. Give specific information | | | |
| | d the dollar value of all of your entries from Par Part 4. Write that number here | | | \$1,140.00 |
| Part 5: | Describe Any Business-Related Property You Own or | Have an Interest In. L | ist any real estate in Part 1. | |
| _ ` | u <mark>own or have any legal or equitable interest in any b</mark> Go to Part 6 | usiness-related prope | rty? | |

Official Form 106A/B Schedule A/B: Property page 5

 \square Yes. Go to line 38.

Case 1:17-bk-11823 Doc 1 Filed 05/17/17 Entered 05/17/17 17:04:01 Desc Main Page 15 of 51
Case number (if known) Document Debtor 1 Majid Modarressi Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$60,000.00 Part 2: Total vehicles, line 5 \$1,292,00 57. Part 3: Total personal and household items, line 15 \$2,530.00 Part 4: Total financial assets, line 36 58. \$1,140.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61.

\$4,962.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 6

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$4,962.00

\$64,962.00

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| | | I A A A A A A A A A A A A A A A A A A A | | |
|---------------------|--------------------------|-----------------------------------------|-----------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Majid Modarressi | İ | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF OHIO | |
| Case number | | | | |
| (if known) | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify | the Pro | perty You | u Claim a | s Exempt |
|---------|----------|---------|-----------|-----------|----------|
|---------|----------|---------|-----------|-----------|----------|

| 1. | Which set of exem | ptions are | you claiming? | Check one only | , even if | your spouse is | filing with | vou. |
|----|-------------------|------------|---------------|----------------|-----------|----------------|-------------|------|
|----|-------------------|------------|---------------|----------------|-----------|----------------|-------------|------|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption | |
|----------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------|-----------------------------------------------------------------|-------------------------------------------|--|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| 2935 Montana Ave Cincinnati, OH 45211 Hamilton County | \$60,000.00 | | \$136,925.00 | Ohio Rev. Code Ann. § 2329.66(A)(1) | |
| Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(1)(1) | |
| 1998 Mercedes-Benz E-320 140,000 miles | \$1,292.00 | | \$1,292.00 | Ohio Rev. Code Ann. § 2329.66(A)(2) | |
| Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Stove Refrigerator | \$1,330.00 | | \$1,330.00 | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) | |
| Microwave Washer & Dryer Dining room Family room Bedroom Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(*)(*)(u) | |
| (2) Televisions (1) Stereo | \$800.00 | | \$800.00 | Ohio Rev. Code Ann. § | |
| (1) VCR/DVD Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | 2329.66(A)(4)(a) | |
| | | | | | |

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Case number (if known)

| Debitor i wajiu widuarressi | | | | - |
|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|---------|-----------------------------------------------------------------|-------------------------------------------|
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| Clothes Line from Schedule A/B: 11.1 | \$300.00 | | \$300.00 | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) |
| Line IIom Schedule A/B. 1111 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(A)(4)(a) |
| jewelry Line from Schedule A/B: 12.1 | \$100.00 | | \$100.00 | Ohio Rev. Code Ann. § 2329.66(A)(4)(b) |
| Line Holli Govedale 775. | | | 100% of fair market value, up to any applicable statutory limit | 2020100(11)(11)(21) |
| Cash Line from Schedule A/B: 16.1 | \$160.00 | | \$160.00 | Ohio Rev. Code Ann. § 2329.66(A)(3) |
| Line Holli Govedale 782. 1911 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(//)(0) |
| Checking 4704: Cincinnatus Saving & Loan | s \$400.00 | | \$315.00 | Ohio Rev. Code Ann. § 2329.66(A)(3) |
| Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(A)(0) |
| Checking 4704: Cincinnatus Saving & Loan | s \$400.00 | | \$85.00 | Ohio Rev. Code Ann. § 2329.66(A)(18) |
| Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(11)(10) |
| Checking 9813: TruPartners Credit Union | \$50.00 | | \$50.00 | Ohio Rev. Code Ann. § 2329.66(A)(18) |
| Line from Schedule A/B: 17.2 | | | 100% of fair market value, up to any applicable statutory limit | 2020100(1.5)(1.5) |
| Savings 9813: TruPartners Credit Union | \$30.00 | | \$30.00 | Ohio Rev. Code Ann. § 2329.66(A)(18) |
| Line from Schedule A/B: 17.3 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(A)(10) |
| Architectural Realms Inc. Debtor is an architect and runs | \$500.00 | | \$500.00 | Ohio Rev. Code Ann. § 2329.66(A)(18) |
| projects through the corporation 100 % ownership Line from <i>Schedule A/B</i> : 19.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020100(1.1)(1.0) |
| 3. Are you claiming a homestead exemptio (Subject to adjustment on 4/01/19 and ever ■ No □ Yes. Did you acquire the property cove | y 3 years after that for ca | ases fi | · | |
| ☐ Yes | | | | |

Case 1:17-bk-11823 Doc 1 Filed 05/17/17 Entered 05/17/17 17:04:01 Desc Main

| | | Document | <u> Page 18</u> | 01.51 | | |
|-----------------------------------|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------|--------------------------------------------------------|----------------------------------------------|-----------------------------|
| Fill i | n this information to identify yo | ur case: | | | | |
| Debt | or 1 Majid Modarres | ssi | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debt | or 2 se if, filing) First Name | Middle Name | Last Name | | | |
| Ороц | se ii, iiiiig) | | | | | |
| Unite | ed States Bankruptcy Court for the | SOUTHERN DISTRICT OF OHIC |) | | | |
| Case (if kno | e number wn) | | | | | if this is an ded filing |
| Offi | cial Form 106D | | | | | |
| Scl | nedule D: Creditors | s Who Have Claims S | ecured | by Propert | У | 12/15 |
| is nee numb 1. Do [- | ded, copy the Additional Page, fill it er (if known). any creditors have claims secured b | this form to the court with your other so | this form. On | the top of any addition | nal pages, write your na | |
| Part | 1: List All Secured Claims | | | | | |
| 2. Lis | st all secured claims. If a creditor has | more than one secured claim, list the credit | tor separately | Column A | Column B | Column C |
| | | is a particular claim, list the other creditors in tical order according to the creditor's name. | | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 | Chase Home Finance LLC | Describe the property that secures the | e claim: | \$105,018.00 | \$60,000.00 | \$64,770.67 |
| | Creditor's Name | 2935 Montana Ave Cincinnati 45211 Hamilton County | | | | |
| | P.O. Box 24696 Columbus, OH 43224 | As of the date you file, the claim is: Chapply. Contingent | neck all that | | | |
| | Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| Who | owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| _ ` | ebtor 1 only | An agreement you made (such as mo | ortaage or secu | ıred | | |
| _ | ebtor 2 only | car loan) | nigage or secu | ireu | | |
| _ | ebtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mech | anic's lien) | | | |
| _ | t least one of the debtors and another | ☐ Judgment lien from a lawsuit | , | | | |
| | heck if this claim relates to a | Other (including a right to offset) | | | | |
| С | community debt | | | | | |
| Date | debt was incurred 7/2004 | Last 4 digits of account numbe | er <u>6908</u> | | | |
| 2.2 | PNC Bank | Describe the property that secures the | e claim: | \$19,752.67 | \$60,000.00 | \$0.00 |
| | Creditor's Name | 2935 Montana Ave Cincinnati | | , , , , , , , , , , , , , , , , , , , | | |
| | P.O. Box 535230 Pittsburgh, PA 15253-5230 | 45211 Hamilton County As of the date you file, the claim is: Chapply. ☐ Contingent | | | | |
| | Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| Who | owes the debt? Check one. | Disputed Nature of lien. Check all that apply. | | | | |
| □ D | ebtor 1 only ebtor 2 only | An agreement you made (such as mo | ortgage or secu | ıred | | |
| _ | ebtor 2 only ebtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mech | anic's lien) | | | |
| _ | t least one of the debtors and another | Judgment lien from a lawsuit | · · · · · · · · · · · · · · · · · · · | | | |
| □с | heck if this claim relates to a community debt | Other (including a right to offset) | | | | |
| Date | debt was incurred 12/2016 | Last 4 digits of account numbe | er 3511 | | | |

Official Form 106D

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| Debtor 1 | Majid Modarressi | | | Case number (if know) | |
|--------------------|----------------------------------------|---------------------------------------------------|--------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| | First Name | Middle Name | Last Name | | |
| | | | | | |
| Add th | e dollar value of y | our entries in Column A on | this page. Write that number | er here: \$124,770.67 | |
| | s the last page of hat number here: | your form, add the dollar va | alue totals from all pages. | \$124,770.67 | |
| Part 2: | List Others to | Be Notified for a Debt Th | hat You Already Listed | · | |
| trying to than one | collect from you creditor for any o | for a debt you owe to some | one else, list the creditor in | debt that you already listed in Part 1. For example, if a collection agency is Part 1, and then list the collection agency here. Similarly, if you have more creditors here. If you do not have additional persons to be notified for any | e |
| | | et, City, State & Zip Code berg & Reis Co. LPA | | On which line in Part 1 did you enter the creditor? | |
| - | 25 Vine Street | | | Last 4 digits of account number | |
| _ | uite 800 | 45202 | | | |

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| | Case 1.17-bk-11025 L | Document Page 2 | 10 of 51 | 4.01 Desc Main | | | | |
|---------|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------|--|--|--|--|
| Fill i | n this information to identify your case | | | | | | | |
| Debt | tor 1 Majid Modarressi | | | | | | | |
| DCDI | First Name | Middle Name Last Name | | | | | | |
| Debt | | | | | | | | |
| (Spou | se if, filing) First Name | Middle Name Last Name | | | | | | |
| Unite | ed States Bankruptcy Court for the: S | OUTHERN DISTRICT OF OHIO | | | | | | |
| Case | e number | | | | | | | |
| (if kno | | | | ☐ Check if this is an | | | | |
| | | | | amended filing | | | | |
| ⊃ffi∂ | cial Form 106E/F | | | | | | | |
| | | Have Unsecured Claims | | 12/15 | | | | |
| | | art 1 for creditors with PRIORITY claims and | Part 2 for araditors with NONE | | | | | |
| eft. A | ttach the Continuation Page to this page. If and case number (if known). | I by Property. If more space is needed, copy you have no information to report in a Part, | | | | | | |
| Part | | | | | | | | |
| _ | Oo any creditors have priority unsecured cla | aims against you? | | | | | | |
| | No. Go to Part 2. | | | | | | | |
| | Yes. | In a course of Claims | | | | | | |
| Part | | | | | | | | |
| | Do any creditors have nonpriority unsecure | - | | | | | | |
| L | ■ No. You have nothing to report in this part. S | Submit this form to the court with your other sch | edules. | | | | | |
| ı | Yes. | | | | | | | |
| 4. L | ist all of your nonpriority unsecured claims | s in the alphabetical order of the creditor wh | o holds each claim. If a creditor | has more than one nonpriority | | | | |
| | | each claim. For each claim listed, identify what the other creditors in Part 3.If you have more that | | | | | | |
| | Part 2. | | Tuned non-phony undeduced old | out and commutation rage of | | | | |
| | 1 | | | Total claim | | | | |
| 4.1 | Advantage Bank | Last 4 digits of account number | 5188 | \$0.00 | | | | |
| | Nonpriority Creditor's Name 814 Wheeling Ave | When was the debt incurred? | 6/2011 | | | | | |
| | Cambridge, OH 43725 | | 0/2011 | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | • | | | | | |
| | At least one of the debtors and another | | Type of NONPRIORITY unsecured claim: | | | | | |
| | ☐ Check if this claim is for a commun | <u> </u> | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separe report as priority claims | aration agreement or divorce that | t you did not | | | | |
| | ■ No | ☐ Debts to pension or profit-shari | ng plans, and other similar debts | | | | | |
| | ☐ Yes | ■ Other. Specify notice only | | | | | | |
| | | — Other, openly | / | | | | | |

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| Debt | or 1 Majid Modarressi | | Case number (if know) | |
|------|------------------------------------------------------------------------------------------|------------------------------------------------------------|-----------------------------------------------|----------|
| 4.2 | Choice Recovery | Last 4 digits of account number | 186 | \$893.00 |
| | Nonpriority Creditor's Name P.O. Box 20790 | When was the debt incurred? | 11/2015 | |
| | Columbus, OH 43220 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | □ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Collections | . | |
| 4.3 | Choice Recovery Nonpriority Creditor's Name | Last 4 digits of account number | 154 | \$535.00 |
| | P.O. Box 20790 Columbus, OH 43220 | When was the debt incurred? | 11/2012 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other Specify Collections | | |
| 4.4 | Choice Recovery | Last 4 digits of account number | 188 | \$322.00 |
| | Nonpriority Creditor's Name P.O. Box 20790 | When was the debt incurred? | 3/2016 | *** |
| | Columbus, OH 43220 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | Пол | | |
| | <u> </u> | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| | At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Collections | | |
| | 00 | Other, Specify | • | |

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| Debto | ^{r 1} Majid Modarressi | Case number (if know) | |
|-------|------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------|
| 4.5 | Credit Adjustments | Last 4 digits of account number 2401 | \$2,526.00 |
| | Nonpriority Creditor's Name 330 Florence St | When was the debt incurred? 11/2012 | |
| | Defiance, OH 43512 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | □ Yes | Collections TriHealth | |
| 4.6 | Duke Energy | Last 4 digits of account number | \$1,100.00 |
| | Nonpriority Creditor's Name P.O. Box 1327 Charlotte, NC 28201 | When was the debt incurred? 2017 | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify utility service | |
| 4.7 | Good Samaritian Nonpriority Creditor's Name | Last 4 digits of account number | Unknown |
| | P.O. Box 630823 Cincinnati, OH 45263 | When was the debt incurred? 2016 | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | \square Check if this claim is for a community | ☐ Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify acct | |

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| Debto | ¹ Majid Modarressi | Case number (if know) | |
|-------|--------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|----------|
| 4.8 | Hamilton County Clerk of Courts Nonpriority Creditor's Name | Last 4 digits of account number | \$628.00 |
| | 1000 Main St. Romm 315 Cincinnati, OH 45202 | When was the debt incurred? 2/2017 | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Court Cost | |
| 4.9 | Hamilton County Clerk of Courts Nonpriority Creditor's Name | Last 4 digits of account number | \$32.00 |
| | 1000 Main St. Romm 315 Cincinnati, OH 45202 | When was the debt incurred? 3/2003 | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Court Cost | |
| 4.1 | | | 47.40.00 |
| 0 | Hamilton County Clerk of Courts Nonpriority Creditor's Name | Last 4 digits of account number | \$540.00 |
| | 1000 Main St. Romm 315 Cincinnati, OH 45202 | When was the debt incurred? 5/2011 | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | \square Check if this claim is for a community | Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | | | |
| | ☐ Yes | Other. Specify Court Cost | |

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| 1 Majid Modarressi | Case number (if know) | |
|-------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|--------------|
| Hamilton County Clerk of Courts | Last 4 digits of account number | \$9 1 |
| Nonpriority Creditor's Name 1000 Main St. Romm 315 Cincinnati, OH 45202 | When was the debt incurred? 4/1996 | · |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | | |
| □ Yes | Other. Specify Court Cost | |
| Hamilton County Clerk of Courts | Last 4 digits of account number | \$119 |
| Nonpriority Creditor's Name | | |
| 1000 Main St. Romm 315 Cincinnati, OH 45202 | When was the debt incurred? 1/1992 | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify Court Cost | |
| | — Officer, openity | |
| Hamilton County Clerk of Courts | Last 4 digits of account number | \$623 |
| Nonpriority Creditor's Name 1000 Main St. Romm 315 Cincinnati, OH 45202 | When was the debt incurred? 4/2010 | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ☐ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ■ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ■ No | | |
| Yes | ■ Other. Specify Court Cost | |

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| Huntington National Bank | Last 4 digits of account number | 4652 | \$18 |
|----------------------------------------------------------------------|--------------------------------------------------------------|-----------------------------------------------|------|
| Nonpriority Creditor's Name P.O. Box 1558 | When was the debt incurred? | 4/2017 | |
| Columbus, OH 43216 | when was the dept incurred? | 4/2017 | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | ■ Other. Specify Bank Over | draft | |
| Huntington National Bank | Last 4 digits of account number | 3666 | \$42 |
| Nonpriority Creditor's Name | | | Ψ-12 |
| P.O. Box 1558 | When was the debt incurred? | 4/2017 | |
| Columbus, OH 43216 | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| _ | | | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | Debts to pension or profit-sharing | a plane and other similar debte | |
| ■ No | | | |
| Yes | Other. Specify Bank Over | draft | |
| Mt Lookout Dentistry | Last 4 digits of account number | 9583 | \$15 |
| Nonpriority Creditor's Name | · · · · · · · · · · · · · · · · · · · | | |
| 3197 Linwood Ave Cincinnati, OH 45208 | When was the debt incurred? | 5/2017 | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | - - | | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | 3 , | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| □Yes | Other. Specify Dental Serv | vices | |

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| Debtor 1 | Majid Mo | darressi | Document | Page 2 | 6 of 5 | 1 number (i | f know) | | |
|----------------------|-----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-----------------|-------------|----------------|---------------------|-----------------|-------------------|
| 4.1 F | PayPal Cred | dit | Last 4 digits of acc | ount number | | | | | \$600.00 |
| , N | Nonpriority Cred | ditor's Name 6658 | When was the debt | | 2016 | | _ | | φοσοισσ |
| N | Number Street (| . 30348-5658 City State Zlp Code the debt? Check one. | As of the date you | file, the claim | is: Check | all that a | pply | | |
| _ | Debtor 1 onl | | ☐ Contingent | | | | | | |
| [| Debtor 2 onl | ly | ☐ Unliquidated | | | | | | |
| [| Debtor 1 and | d Debtor 2 only | ☐ Disputed | | | | | | |
| [| At least one | of the debtors and another | Type of NONPRIOR | RITY unsecure | d claim: | | | | |
| [| ☐ Check if thi | s claim is for a community | ☐ Student loans | | | | | | |
| | lebt s the claim su | bject to offset? | Obligations arising report as priority clai | | aration ag | reement o | or divorce that you | did not | |
| | No | | Debts to pension | or profit-shari | ng plans, a | and other | similar debts | | |
| [| ☐Yes | | Other. Specify | Charge Ac | count | | | | |
| 4.1 8 | JC Health | | Last 4 digits of acc | ount number | | | | | Unknown |
| F | Onpriority Cred | 10117 | When was the debt | incurred? | 2016 | | _ | | |
| | Cincinnati, Jumber Street (| OH 45274 City State Zlp Code | As of the date you | file, the claim | is: Check | all that a | nnly | | |
| | | the debt? Check one. | , , , , , | , | 0.100. | · a a.a. a | PP-) | | |
| ı | ■ Debtor 1 onl | lv | ☐ Contingent | | | | | | |
| Г | Debtor 2 onl | lv | ☐ Unliquidated | | | | | | |
| | Debtor 1 and Debtor 2 only | | □ Disputed | | | | | | |
| _ | _ | of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | | | | | | |
| _ | _ | s claim is for a community | | | | | | | |
| d | lebt | • | Obligations arising out of a separation agreement or divorce that you did not | | | | | | |
| _ | _ | bject to offset? | report as priority clai | | og plone | and other | aimilar dahta | | |
| | ■ No | | _ | • | | and other | Similar debis | | |
| L | Yes | | Other. Specify | Medical Se | rvices | | | | |
| Part 3: | | s to Be Notified About a Deb | | | | | | | |
| is trying have mo | g to collect fro ore than one c for any debts | you have others to be notified about on you for a debt you owe to son creditor for any of the debts that in Parts 1 or 2, do not fill out or mounts for Each Type of Uns | neone else, list the origi you listed in Parts 1 or submit this page. | inal creditor i | n Parts 1 | or 2, ther | list the collection | n agency here. | Similarly, if you |
| 6. Total th | | certain types of unsecured clain | | or statistical | reporting | purpose | s only. 28 U.S.C. § | §159. Add the a | mounts for each |
| | | | | | | | Total Claim | | |
| т. | 6a. | Domestic support obligations | | | 6a. | \$ | | 0.00 | |
| claii | ntal ms | | | | | | | | |
| from Par | | Taxes and certain other debts | = | | 6b. | \$ | | 0.00 | |
| | 6c. 6d. | Claims for death or personal in Other. Add all other priority unse | | | 6c. 6d. | \$ | | 0.00 | |
| | ou. | Add all other priority drise | oarou olalina. Wille tiidt e | amount nere. | Ju. | Φ | | <u> </u> | |
| | 6e. | Total Priority. Add lines 6a throu | ugh 6d. | | 6e. | \$ | | 0.00 | |
| | | | | | | | Total Claim | | |
| | 6f. | Student loans | | | 6f. | \$ | . Juli Glallii | 0.00 | |

Total claims from Part 2

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

6g.

Obligations arising out of a separation agreement or divorce that you did not report as priority claims
Debts to pension or profit-sharing plans, and other similar debts

6h.

0.00

0.00

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Case number (if know) Debtor 1 Majid Modarressi

Total Nonpriority. Add lines 6f through 6i.

| 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 8,769.86 | |
|-----|-----------------------------------------------------------------------------------|-----|----------------|--|
| | | | | |

8,769.86

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| | | I A A A A I I I I I | 111 1 11111. 7 (1 (1) . 7 1 | |
|---------------------|--------------------------|---------------------|-----------------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Majid Modarress | İ | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF OHIO | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Number | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------|-------------------------------------------------------|-------------------|-----------------------------------------|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| 0 | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | J., | | State | | |

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| | | Documei | nt Page 29 of | <u>f 51</u> |
|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| Fill in thi | is information to identify your c | ase: | | |
| Debtor 1 | Majid Modarressi | | | |
| Debior 1 | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, f | iling) First Name | Middle Name | Last Name | |
| United St | tates Bankruptcy Court for the: | SOUTHERN DISTRICT | OF OHIO | |
| 0 | | | | |
| Case nur | mber | | | ☐ Check if this is an |
| , | | | | amended filing |
| | | | | |
| Officia | al Form 106H | | | |
| | dule H: Your Code | htore | | 40/45 |
| Scrie | dule H. Your Code | 301012 | | 12/15 |
| □ No ■ Ye 2. Wi Arizo □ No □ Ye 3. In Co | es ithin the last 8 years, have you ona, California, Idaho, Louisiana, o. Go to line 3. es. Did your spouse, former spousoumn 1, list all of your codebto | lived in a community pro Nevada, New Mexico, Pue se, or legal equivalent live | operty state or territory erto Rico, Texas, Washin with you at the time? | (? (Community property states and territories include ngton, and Wisconsin.) if your spouse is filing with you. List the person showr |
| Forn | | | | sure you have listed the creditor on Schedule D (Officia 6G). Use Schedule D, Schedule E/F, or Schedule G to fi |
| | Column 1: Your codebtor Name, Number, Street, City, State and ZIP | ^o Code | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 3.1 | Architectual Realms Inc 2935 Montana Ave Ste 1 Cincinnati, OH 45211 | | | ■ Schedule D, line □ Schedule E/F, line □ Schedule G PNC Bank |
| 3.2 | Architectual Realms Inc 2935 Montana Ave Ste 1 Cincinnati, OH 45211 | | | ☐ Schedule D, line ■ Schedule E/F, line4.13 ☐ Schedule G Hamilton County Clerk of Courts |

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| Fill | in this information to identify your c | ase. | | | | | | | | |
|---------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-------------------------------------------------|--------------------|------------------|--------------------|------------------------|--------------------------|---------------------------|----------------------|
| | otor 1 Majid Moda | | | | | | | | | |
| | otor 2 use, if filing) | | | | | | | | | |
| Uni | ted States Bankruptcy Court for the | : SOUTHERN DISTRIC | CT OF OHIO | | | | | | | |
| | se number own) | | | | | ☐ Ar | | ent showing | g postpetitic | • |
| O | fficial Form 106I | | | | | M | M / DD/ Y | YYY | | |
| S | chedule I: Your Inc | ome | | | | | | | | 12/15 |
| sup _i spo atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | are married and not filing w | ng jointly, and your s ith you, do not inclu | spouse de infor | is livi matic | ing with yon about | /ou, inclu your spo | ude inform use. If mo | ation abou re space is | ut your s needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | | Debtor 2 | or non-fil | ing spous | e |
| | If you have more than one job, | Employment status | ■ Employed | Employed | | | ☐ Emplo | yed | | |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | | | | ☐ Not employed | | | |
| | employers. | Occupation | Self Employed | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Architectural Re | ealms I | nc | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 2935 Montana A Cincinnati, OH 4 | | | | | | | |
| | | How long employed t | here? | | | | _ | | | |
| Par | t 2: Give Details About Mor | nthly Income | | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to re | eport for | any I | ine, write | \$0 in the | space. Incl | lude your n | on-filing |
| • | u or your non-filing spouse have mo | | ombine the information | n for all | emplo | yers for t | hat perso | n on the lin | es below. I | If you need |
| | · | | | | | For Deb | tor 1 | For Deb | tor 2 or ng spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | | 0.00 | \$ | N/A | <u> </u> |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | <u> </u> |

0.00

\$

N/A

Calculate gross Income. Add line 2 + line 3.

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| Debt | tor 1 | Majid Modarressi | _ | Ca | ase number (if known) | _ | | | | |
|----------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-------------|--------------------|-------------|-----------|
| | | | | | | | | | | |
| | | | | F | For Debtor 1 | | | Debtor filing s | 2 or spouse | |
| | Cop | y line 4 here | 4. | - | 0.00 | | \$ | 9 | N/A | _ |
| | · | | | | | | - | | | _ |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | 9 | 0.00 | | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | , | 0.00 | _ | \$ | | N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | | | \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | , | | | \$ | | N/A | _ |
| | 5e. 5f. | Insurance Domestic support obligations | 5e. 5f. | 9 | | | \$ | | N/A N/A | _ |
| | 5g. | Union dues | 5g. | | 0.00 | | \$ — | | N/A N/A | _ |
| | 5h. | Other deductions. Specify: | 5h | | - 0.00 | + | * | | N/A | _ |
| 6 | - | | _ | \$ | | | | | | _ |
| 6. 7. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. culate total monthly take-home pay. Subtract line 6 from line 4. | 6. 7. | \$ | | | \$ \$ | | N/A N/A | _ |
| | | | ٠. | Ψ | 0.00 | | Ψ | | IVA | _ |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, | | | | | | | | |
| | ou. | profession, or farm | | | | | | | | |
| | | Attach a statement for each property and business showing gross | | | | | | | | |
| | | receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | 9 | 1,286.62 | | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b. | | ., | | <u>\$</u> — | | N/A | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent | | , | 0.00 | | · — | | 14// | _ |
| | | regularly receive | | | | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | 9 | 0.00 | | \$ | | N/A | |
| | 8d. | Unemployment compensation | 8d. | | | | \$— | | N/A | _ |
| | 8e. | Social Security | 8e. | | 0.00 | | \$ | | N/A | _ |
| | 8f. | Other government assistance that you regularly receive | | | | | - | | | _ |
| | | Include cash assistance and the value (if known) of any non-cash assistance | | | | | | | | |
| | | that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | | | |
| | | Specify: | 8f. | 9 | 0.00 | | \$ | | N/A | |
| | 8g. | Pension or retirement income | 8g. | 9 | 0.00 | | \$ | | N/A | _ |
| | 8h. | Other monthly income. Specify: | 8h | + \$ | 0.00 | + | \$ | | N/A | _ |
| _ | | | _ | | | 1 | | | | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 1,286.62 | 1 | \$ | | N/A | A |
| | | | | | | _ | | $\overline{}$ | | |
| 10. | | | 10. \$ | <u> </u> | 1,286.62 + \$ | _ | | N/A | = \$ _ | 1,286.62 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | L | | | | | | | |
| 11. | | e all other regular contributions to the expenses that you list in Schedule | | | | _ | | | | |
| | | ude contributions from an unmarried partner, members of your household, your or friends or relatives. | aeper | naei | nts, your roommate | s, | and | | | |
| | | not include any amounts already included in lines 2-10 or amounts that are not | availal | ble t | to pay expenses lis | te | d in Sc | chedule | <i>∃</i> . | |
| | Spe | cify: | | | | | _ | 11. | +\$ | 0.00 |
| 40 | A .1 | the emount in the less selium of the 40 to the survey to the 44. | 14 | ul | and the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of the sales of t | | | ļ | | |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certai | | | | | | | | |
| | app | | II LIGO | ,,,,,, | o and Related Dat | u, | | 12. | \$ | 1,286.62 |
| | | | | | | | | ١ | Combi | ned |
| | | | | | | | | | | ly income |
| 13. | Do | ou expect an increase or decrease within the year after you file this form | ? | | | | | | | - |
| | | No. | | | | | | | | |
| | | Yes Explain: | | | | | | | | |

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| Bille | in this informat | tion to identify yo | our case: | | | | | |
|---------------------|----------------------------------------------------|-------------------------------------------------------|---------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-------------|-----------------------------------|-------------------------------|
| | | | | | | | | |
| Deb | tor 1 | Majid Modar | ressi | | | Che | ck if this is: An amended filing | |
| Deb | otor 2 | | | | | H | J | ving postpetition chapter |
| (Spc | ouse, if filing) | | | | | _ | 13 expenses as of | |
| Unite | ed States Bankru | uptcy Court for the | : SOUTH | IERN DISTRICT OF OHIC |) | | MM / DD / YYYY | |
| Case | e number | | | | | | | |
| l | nown) | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | |
| Sc | chedule | J: Your | Exner | 1888 | | | | 12/15 |
| Be a info nun | as complete a ormation. If mo mber (if knowi | and accurate as ore space is ne n). Answer ever | possible. eded, atta ry questio | If two married people and the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the contro | | | | or supplying correct |
| Pari | t 1: Descri | ibe Your House | hold | | | | | |
| ١. | No. Go to | | | | | | | |
| | _ | | in a senar: | ate household? | | | | |
| | □ No | | iii a sopaii | ate nousenoia. | | | | |
| | | | st file Offici | al Form 106J-2, <i>Expenses</i> | s for Separate House | hold of Deb | otor 2. | |
| 2. | Do you have | e dependents? | ■ No | | | | | |
| | Do not list De Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents r | names. | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| 3. | Do your exp | enses include | _ | | | | | ☐ Yes |
| | expenses of yourself and | people other to your depende | han nts? □ | No Yes | | | | |
| exp | imate your ex | | our bankrı | y Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| the | | n assistance an | | government assistance i cluded it on <i>Schedule I:</i> Y | | | Your exp | enses |
| 4. | | r home owners | | ses for your residence. I | nclude first mortgage | 4. : | \$ | 407.97 |
| | If not include | ed in line 4: | - | | | | | |
| | 4a. Real e | state taxes | | | | 4a. | \$ | 0.00 |
| | | rty, homeowner's | s, or renter | 's insurance | | 4b. | | 0.00 |
| | | | • | ıpkeep expenses | | 4c. | \$ | 100.00 |
| _ | | owner's associat | | | | 4d. | | 0.00 |
| 5. | Additional n | nortgage payme | ents for yo | our residence , such as ho | me equity loans | 5. | Ф | 0.00 |

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| Debtor 1 Majid Modarressi | Case number (if known) | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------------|
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. \$ | 250.00 |
| 6b. Water, sewer, garbage collection | 6b. \$ | 130.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ | 124.00 |
| 6d. Other. Specify: | 6d. \$ | 0.00 |
| 7. Food and housekeeping supplies | 7. \$ | 400.00 |
| Childcare and children's education costs | 8. \$ | 0.00 |
| Clothing, laundry, and dry cleaning | 9. \$ | 175.00 |
| Clothing, laundry, and dry cleaning Personal care products and services | 10. \$ | |
| • | · | 60.00 |
| Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. | 11. \$ | 100.00 |
| Do not include car payments. | 12. \$ | 350.00 |
| 3. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. \$ | 10.00 |
| 4. Charitable contributions and religious donations | 14. \$ | 0.00 |
| 5. Insurance. | · — | |
| Do not include insurance deducted from your pay or included in lines 4 or 20 | | |
| 15a. Life insurance | 15a. \$ | 0.00 |
| 15b. Health insurance | 15b. \$ | 34.00 |
| 15c. Vehicle insurance | 15c. \$ | 48.45 |
| 15d. Other insurance. Specify: | 15d. \$ | 0.00 |
| 6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or | 20. | |
| Specify: | 16. \$ | 0.00 |
| 7. Installment or lease payments: | 170 ¢ | 0.00 |
| 17a. Car payments for Vehicle 1 | 17a. \$ | 0.00 |
| 17b. Car payments for Vehicle 2 | 17b. \$ | 0.00 |
| 17c. Other. Specify: | 17c. \$ | 0.00 |
| 17d. Other. Specify: | 17d. \$ | 0.00 |
| Your payments of alimony, maintenance, and support that you did not deducted from your pay on line 5, Schedule I, Your Income (Official For | | 0.00 |
| 9. Other payments you make to support others who do not live with you. | \$ | 0.00 |
| Specify: | 19. | 0.00 |
| Other real property expenses not included in lines 4 or 5 of this form or | | |
| 20a. Mortgages on other property | 20a. \$ | 0.00 |
| 20b. Real estate taxes | 20b. \$ | 0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c. \$ | 0.00 |
| 20d. Maintenance, repair, and upkeep expenses | 20d. \$ | 0.00 |
| 20e. Homeowner's association or condominium dues | 20e. \$ | 0.00 |
| Other: Specify: | 21. +\$ | 0.00 |
| | | 0.00 |
| 2. Calculate your monthly expenses | | |
| 22a. Add lines 4 through 21. | \$ | 2,189.42 |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form | | |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | \$ | 2,189.42 |
| 3. Calculate your monthly net income. | | |
| 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. \$ | 1,286.62 |
| 23b. Copy your monthly expenses from line 22c above. | 23b\$ | 2,189.42 |
| 1,,, | - · · · · · · · · · · · · · · · · · · · | £,100.7£ |
| 23c. Subtract your monthly expenses from your monthly income. | | 000 00 |
| The result is your monthly net income. | 23c. \$ | -902.80 |
| 4. Do you expect an ingresse or decrease in your expenses within the con- | or ofter you file this form? | |
| Do you expect an increase or decrease in your expenses within the year For example, do you expect to finish paying for your car loan within the year or do you | | se or decrease because o |
| modification to the terms of your mortgage? | , and the manage payment to moroace | |
| ■ No. | | |
| T Voc Evolain here: | | |

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| Fill in this infor | mation to identify your | case: | | | |
|-----------------------------------------|----------------------------------------------------|---------------------------|----------------------------|----------------------------|--------------------------------------------------------------------|
| Debtor 1 | • | | | | |
| Debior 1 | Majid Modarressi | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF OHIO | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| · You must file th obtaining mone | is form whenever you fi | n connection with a bank | or amended schedules | s. Making a false stateme | nt, concealing property, or r imprisonment for up to 20 |
| Sig | ın Below | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an attorn | ney to help you fill out I | bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | tcy Petition Preparer's Notice, d Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sumi | mary and schedules file | ed with this declaration a | nd |
| X /s/ Ma | jid Modarressi | | X | | |
| Majid | Modarressi | | Signature of | Debtor 2 | |
| Signatu | re of Debtor 1 | | | | |
| Date | May 17, 2017 | | Date | | |

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| Fill i | n this inform | nation to identify you | r case: | | | | | | | |
|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|--------------------------------------------|---------------------------------------------------------------------------------------------|---------------------------------------------------------------|-------------------------------------------------------|--|--|--|--|
| Debt | | Majid Modarress | | | | | | | | |
| Dobt | .01 1 | First Name | Middle Name | Last Name | | | | | | |
| Debt (Spou | or 2 se if, filing) | First Name | Middle Name | Last Name | | | | | | |
| | - | nkruptcy Court for the: | SOUTHERN DISTRICT (| OF OHIO | | | | | | |
| | | . , | | | | | | | | |
| (if kno | e number wn) | | | | | Check if this is an amended filing | | | | |
| Sta Be as | s complete a | of Financial | ble. If two married people a | | ankruptcy equally responsible for sup | | | | | |
| | |). Answer every ques | • | this form. On the top of any | additional pages, write you | ur name and case | | | | |
| Part | | | rital Status and Where You | Lived Before | | | | | | |
| 1. \ | What is your | t is your current marital status? | | | | | | | | |
| | ■ Married■ Not married | ried | | | | | | | | |
| 2. I | During the la | ng the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | |
| | No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | | | | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | | | |
| | | | | | ity property state or territor co, Texas, Washington and V | | | | | |
| | ■ No □ Yes. Ma | ke sure you fill out <i>Sch</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | | | | | |
| Part | 2 Explain | n the Sources of You | r Income | | | | | | | |
| I | Fill in the tota | I amount of income yo | u received from all jobs and a | ng a business during this yeall businesses, including parter together, list it only once ur | | ndar years? | | | | |
| | □ No ■ Yes. Fill | in the details. | | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | |
| From January 1 of current year until the date you filed for bankruptcy: | | | ☐ Wages, commissions, bonuses, tips | \$2,788.00 | ☐ Wages, commissions, bonuses, tips | | | | | |
| | | | Operating a business | | ☐ Operating a business | | | | | |

Official Form 107

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Case number (if known) Document

Debtor 1 Majid Modarressi

| | Debtor 1 | | Debtor 2 | | | |
|------------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------|--------------------------------------------|-------------------------------------------------------|--|--|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | |
| For last calendar year: (January 1 to December 31, 2016) | ☐ Wages, commissions, bonuses, tips | \$12,450.00 | ☐ Wages, commissions, bonuses, tips | | | |
| | Operating a business | | ☐ Operating a business | | | |
| For the calendar year before that: (January 1 to December 31, 2015) | ☐ Wages, commissions, bonuses, tips | \$5,100.00 | ☐ Wages, commissions, bonuses, tips | | | |
| | Operating a business | | ☐ Operating a business | | | |
| | | | | | | |

Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

| | Debtor 1 | | Debtor 2 | |
|-------------------------------------------------------------------------|--------------------------------------|---------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------|
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | Rental Income (Real Estate) | \$8,235.00 | | |
| For last calendar year: (January 1 to December 31, 2016) | Rental Income (Real Estate) | \$7,255.00 | | |
| For the calendar year before that: (January 1 to December 31, 2015) | Rental Income (Real Estate) | \$5,549.00 | | |

List Certain Payments You Made Before You Filed for Bankruptcy

| 6. | Are either | Debtor 1 | 's or | Debtor | 2's c | lebts | primari | ily cons | sumer (| deb | ts |
|----|------------|----------|-------|--------|-------|-------|---------|----------|---------|-----|----|
|----|------------|----------|-------|--------|-------|-------|---------|----------|---------|-----|----|

☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

 \square No.

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

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Debtor 1 Majid Modarressi

| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this pa | yment for |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|----------------------------------------------------|---------------------------------------------|---------------------------------|----------------------------------------------------|
| 7. | Within 1 year before you filed for bankrupto <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | rtners; relatives of any gene control, or owner of 20% or | eral partners; partners or more of their votin | erships of which yo g securities; and ar | u are a genera ny managing a | I partner; corporations gent, including one for |
| | NoYes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 8. | Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi | | ments or transfer a | any property on a | ccount of a de | ebt that benefited an |
| | ■ No | | | | | |
| | ☐ Yes. List all payments to an insider Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment tor's name |
| Par | t 4: Identify Legal Actions, Repossession | s, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | e case |
| | PNC Bank v Majid Modarressi | collections | Hamilton Cour 1000 Main St. I Cincinnati, OH | Romm 315 | ■ Pending □ On appe □ Conclude | |
| | | | | | post judgn | nent collections |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. | | rty repossessed, t | foreclosed, garnis | hed, attached | , seized, or levied? |
| | Yes. Fill in the information below. Creditor Name and Address | Describe the Property | | Date | | Value of the |
| | | Explain what happened | | | | property |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details. | | uding a bank or fi | nancial institution | ı, set off any a | mounts from your |
| | Creditor Name and Address | Describe the action the | creditor took | Date taken | action was | Amount |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or all No Yes | | rty in the possess | ion of an assigne | e for the bene | fit of creditors, a |

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| | | Document | Page 38 01 51 | |
|----------|------------------|----------|------------------------|--|
| Debtor 1 | Majid Modarressi | | Case number (if known) | |

| Pa | tt 5: List Certain Gifts and Contributions | | | |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|--------------------------|
| 13. | Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift. | cy, did you give any gifts with a total value of more t | than \$600 per person | ? |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | |
| 14. | ■ No | cy, did you give any gifts or contributions with a tota | al value of more than | \$600 to any charity? |
| | Yes. Fill in the details for each gift or contr | ibution. | | |
| | Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | Describe what you contributed | Dates you contributed | Value |
| Pa | rt 6: List Certain Losses | | | |
| 15. | or gambling? No Yes. Fill in the details. | y or since you filed for bankruptcy, did you lose any | tning because of the | t, fire, other disaster, |
| | how the loss occurred Inc | scribe any insurance coverage for the loss clude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Pa | rt 7: List Certain Payments or Transfers | | | |
| 16. | consulted about seeking bankruptcy or prep | y, did you or anyone else acting on your behalf pay opering a bankruptcy petition? arers, or credit counseling agencies for services require | | rty to anyone you |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Ryan J. Really, Attorney at Law, LLC 810 Sycamore 4th Floor Cincinnati, OH 45202 info@getreallylegal.com | Attorney Fees | 5/15/17 | \$1,165.00 |
| 17. | Within 1 year before you filed for bankruptcy promised to help you deal with your creditor. Do not include any payment or transfer that you | | or transfer any prope | rty to anyone who |
| | | Decembration and reduce of account | Data marine | A |
| | Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Ryan J. Ruehle, Atty at Law, LLC 810 Sycamore 4th FL Cincinnati, OH 45202 | \$200.00 -legal advice(non-bankruptcy) | 11/29/16 | \$200.00 |

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property Official Form 107

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Debtor 1 Majid Modarressi

| | transferred in the ordinary course of your Include both outright transfers and transfers minclude gifts and transfers that you have alrea No Yes. Fill in the details. | nade | as security (such as | the granting of a s | security in | terest or mortgage on y | our prop | erty). Do not |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------------|--------------------------------------------------------|-------------|--------------------------------------------------------------|-----------------|----------------------------------------|
| | Person Who Received Transfer Address | | Description and property transfe | | paym | ribe any property or ents received or debts n exchange | | te transfer was de |
| | Person's relationship to you | | | | · | | | |
| 19. | Within 10 years before you filed for bankru beneficiary? (These are often called asset-pi ■ No □ Yes. Fill in the details. | | | iny property to a s | self-settle | ed trust or similar devi | ce of wh | nich you are a |
| | Name of trust | | Description and | value of the prop | erty trans | sferred | Da ^r | te Transfer was |
| Par | t 8: List of Certain Financial Accounts, Ir | | | | | | 1110 | uc |
| 20. | Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No Yes. Fill in the details. | or of | her financial acco | unts; certificates | of depos | - | - | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | | st 4 digits of count number | Type of accourtinstrument | nt or | Date account was closed, sold, moved, or transferred | b | Last balance efore closing or transfer |
| | Huntington Bank P.O. Box 15026 Wilmington, DE 19850 | XX | xxx-0233 | ■ Checking □ Savings □ Money Mark □ Brokerage □ Other | et | 2/2017 | | \$0.00 |
| | Huntington National Bank P.O. Box 1558 Columbus, OH 43216 | XX | XXX-4652 | ■ Checking □ Savings □ Money Mark □ Brokerage □ Other | et | 4/2017 | | \$0.00 |
| | Huntington National Bank P.O. Box 1558 Columbus, OH 43216 | XX | XX-0366 | ■ Checking □ Savings □ Money Mark □ Brokerage □ Other_ | et | 5/2017 | | \$0.00 |
| 21. | Do you now have, or did you have within 1 cash, or other valuables? | yeaı | before you filed fo | or bankruptcy, an | y safe de | posit box or other dep | ository | for securities, |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | | Who else had ac Address (Number, State and ZIP Code) | | Describe | the contents | | Do you still nave it? |

Doc 1 Filed 05/17/17 Entered 05/17/17 17:04:01 Desc Main Case 1:17-bk-11823 Page 40 of 51 Document ase number (*if known*) Debtor 1 Majid Modarressi 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Describe the contents Do you still Who else has or had access Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Value Owner's Name Where is the property? Describe the property (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Date of notice Name of site Governmental unit Environmental law, if you Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code)

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)

Official Form 107

Case 1:17-bk-11823 Doc 1 Filed 05/17/17 Entered 05/17/17 17:04:01 Desc Main Page 41 of 51 Case number (if known) Document Debtor 1 Majid Modarressi ■ A partner in a partnership An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Architectural Realms Inc. architect EIN: x5690 2935 Montana Av From-To 1997 to present Cincinnati, OH 45211 Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Date Issued Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Majid Modarressi Signature of Debtor 2 Majid Modarressi Signature of Debtor 1 Date May 17, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Ohio

| In | re Majid Modarressi | | Case N | 0. | |
|------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|----------------------|----------------------|
| | | Debtor(s) | Chapte | r 7 | |
| | DISCLOSURE OF COMPEN | SATION OF ATTO | RNEY FOR | DEBTOR(S) | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(1) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of | g of the petition in bankruptcy | , or agreed to be p | aid to me, for servi | |
| | | | | 1,600.00 | |
| | Prior to the filing of this statement I have received | | \$ | 1,165.00 | |
| | Balance Due | | | 435.00 | |
| 2. | \$_335.00 of the filing fee has been paid. | | | | |
| 3. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. | ■ I have not agreed to share the above-disclosed compe | ensation with any other person | unless they are m | embers and associa | ates of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name | | | | my law firm. A |
| 6. | In return for the above-disclosed fee, I have agreed to ren | nder legal service for all aspec | ts of the bankrupto | y case, including: | |
| | a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Exemption planning; filing of reaffirmation | ment of affairs and plan which rs and confirmation hearing, a | h may be required; nd any adjourned | nearings thereof; | bankruptcy; |
| 7. | By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any lien stay actions or any other adversary proc | avoidance, dischargeabi | | icial lien avoida | nces, relief from |
| | | CERTIFICATION | | | |
| this | I certify that the foregoing is a complete statement of any bankruptcy proceeding. | agreement or arrangement fo | r payment to me fo | or representation of | the debtor(s) in |
| - | May 17, 2017 Date | Isl Ryan J. Really Ryan J. Really 86 Signature of Attorn Ryan J. Really, A 810 Sycamore 4t Cincinnati, OH 4 513-621-0999 Fainfo@getreallyle Name of law firm | 8257-KY/007049 ey Attorney at Law, th Floor 5202 ax: 513-621-870 | LLC | |

| | | | | _ | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|----------------------------------------------|---------------------------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|----------------------------------------------------------------|-----------------------|
| Fill in | this information to identify your case: | | | | | | irected in | this form and in Fo | orm |
| Debto | or 1 Majid Modarressi | | | 122 | A-1Su | pp: | | | |
| Debto (Spouse | or 2 e, if filing) | | | | ■ 1. Th | nere is no pres | umption (| of abuse | |
| United | d States Bankruptcy Court for the: Southern D | istrict of Oh | iio | | а | | nade und | ine if a presumption ler <i>Chapter 7 Mear</i> 2 1224 2) | |
| Case (if know | number | | | , | _ | ` | | , | (|
| | • | | | _ | | | | t apply now becaus but it could apply la | |
| | | | | I | □ Che | eck if this is a | n amen | ded filing | |
| Office of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other contracts of the other co | <u>cial Form 122A - 1</u> | | | | | | | | |
| Cha | apter 7 Statement of Your | Curre | nt Monthl | y Inc | ome | 9 | | | 12/1 |
| attach a case ni | complete and accurate as possible. If two married particles as separate sheet to this form. Include the line number (if known). If you believe that you are exemping military service, complete and file Statement of Calculate Your Current Monthly Incom | ber to which ted from a p Exemption | the additional info resumption of abu | rmation a | pplies. se you o | On the top of aid on the top of aid on the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the top of the t | ny addition | nal pages, write you sumer debts or bec | r name and ause of |
| 1. \ | What is your marital and filing status? Check | one only. | | | | | | | |
| _ | ☐ Not married . Fill out Column A, lines 2-11. | | | | | | | | |
| [| \square Married and your spouse is filing with you | . Fill out bo | th Columns A and | B, lines | 2-11. | | | | |
| ı | ■ Married and your spouse is NOT filing wit | h you. You | and your spous | e are: | | | | | |
| | Living in the same household and are n | ot legally s | separated. Fill out | t both Col | umns A | A and B, lines 2 | 2-11. | | |
| | Living separately or are legally separate penalty of perjury that you and your spous living apart for reasons that do not include | ed. Fill out (se are legal | Column A, lines 2- y separated unde | 11; do no r nonbanl | t fill out kruptcy | Column B. By law that applie | checking | • | |
| 101 the | in the average monthly income that you received f (10A). For example, if you are filing on September 15, 6 months, add the income for all 6 months and divide uses own the same rental property, put the income fro | the 6-month the total by 6 | period would be Ma Fill in the result. Do | rch 1 throu not includ | gh Augu e any in | ust 31. If the amo | ount of you ore than o | r monthly income var nce. For example, if b | ied during |
| | | | | | Colum Debto | | Columbo Debtoi non-fil | | |
| | Your gross wages, salary, tips, bonuses, ove payroll deductions). | rtime, and | commissions (b | efore all | \$ | 0.00 | \$ | 0.00 | |
| | Alimony and maintenance payments. Do not i Column B is filled in. | nclude pay | ments from a spor | use if | \$ | 0.00 | \$ | 0.00 | |
| f a | All amounts from any source which are regulated you or your dependents, including child super an unmarried partner, members of your house and roommates. Include regular contributions frought in. Do not include payments you listed on liested o | upport. Incusehold, your a spous | ude regular contri ur dependents, pa | ibutions arents, | \$ | 0.00 | \$ | 0.00 | |
| 5. N | Net income from operating a business, profe | ssion, or fa | | | | | | | |
| | | œ | Debtor 1 810.62 | | | | | | |
| | Gross receipts (before all deductions) | \$ -\$ | 158.00 | | | | | | |
| | Ordinary and necessary operating expenses Net monthly income from a business, | -Ψ | | Сору | | | | | |
| 1 | profession, or farm | \$ | 652.62 | here -> S | \$ | 652.62 | \$ | 0.00 | |
| 6. N | Net income from rental and other real proper | ty | | | | | | | |
| | | • | Debtor 1 | | | | | | |
| İ | Gross receipts (before all deductions) | \$ | 1,647.00 | | | | | | |
| | Ordinary and necessary operating expenses | - \$ | 1,013.00 | Сору | | | | | |
| | Net monthly income from rental or other real property | \$ | 634.00 | here -> S | \$ | 634.00 | \$ | 0.00 | |

Official Form 122A-1

property

0.00

\$

7. Interest, dividends, and royalties

0.00

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Majid Modarressi Debtor 1 Case number (if known) Column A Column B Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 0.00 Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 1,286.62 0.00 1,286.62 \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: Copy line 11 here=> 12a. Copy your total current monthly income from line 11 1,286.62 Multiply by 12 (the number of months in a year) 12 15,439.44 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: OH Fill in the state in which you live. Fill in the number of people in your household. 2 57,938.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Majid Modarressi Majid Modarressi Signature of Debtor 1 Date May 17, 2017 MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Current Monthly Income Details for the Debtor

Debtor Income Details:

Debtor 1

Income for the Period 11/01/2016 to 04/30/2017.

Line 5 - Income from operation of a business, profession, or farm

Source of Income: Architectural Realms Inc.

Income/Expense/Net by Month:

| | Date | Income | Expense | Net |
|---------------|--------------------|------------|-----------------------------|----------|
| 6 Months Ago: | 11/2016 | \$1,038.00 | \$474.00 | \$564.00 |
| 5 Months Ago: | 12/2016 | \$1,038.00 | \$474.00 | \$564.00 |
| 4 Months Ago: | 01/2017 | \$450.00 | \$0.00 | \$450.00 |
| 3 Months Ago: | 02/2017 | \$900.00 | \$0.00 | \$900.00 |
| 2 Months Ago: | 03/2017 | \$987.70 | \$0.00 | \$987.70 |
| Last Month: | 04/2017 | \$450.00 | \$0.00 | \$450.00 |
| _ | Average per month: | \$810.62 | \$158.00 | |
| | | | Average Monthly NET Income: | \$652.62 |

Line 6 - Rent and other real property income

Source of Income: **Rental Income** Income/Expense/Net by Month:

| | Date | Income | Expense | Net |
|---------------|--------------------|------------|-----------------------------|----------|
| 6 Months Ago: | 11/2016 | \$1,647.00 | \$1,013.00 | \$634.00 |
| 5 Months Ago: | 12/2016 | \$1,647.00 | \$1,013.00 | \$634.00 |
| 4 Months Ago: | 01/2017 | \$1,647.00 | \$1,013.00 | \$634.00 |
| 3 Months Ago: | 02/2017 | \$1,647.00 | \$1,013.00 | \$634.00 |
| 2 Months Ago: | 03/2017 | \$1,647.00 | \$1,013.00 | \$634.00 |
| Last Month: | 04/2017 | \$1,647.00 | \$1,013.00 | \$634.00 |
| | Average per month: | \$1,647.00 | \$1,013.00 | |
| | | | Average Monthly NET Income: | \$634.00 |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Advantage Bank 814 Wheeling Ave Cambridge, OH 43725

Architectual Realms Inc 2935 Montana Ave Ste 1 Cincinnati, OH 45211

Chase Home Finance LLC P.O. Box 24696 Columbus, OH 43224

Choice Recovery P.O. Box 20790 Columbus, OH 43220

Credit Adjustments 330 Florence St Defiance, OH 43512

Duke Energy P.O. Box 1327 Charlotte, NC 28201

Good Samaritian P.O. Box 630823 Cincinnati, OH 45263

Hamilton County Clerk of Courts 1000 Main St. Romm 315 Cincinnati, OH 45202

Huntington National Bank P.O. Box 1558 Columbus, OH 43216

Mt Lookout Dentistry 3197 Linwood Ave Cincinnati, OH 45208

PayPal Credit PO Box 105658 Atlanta, GA 30348-5658

PNC Bank
P.O. Box 535230
Pittsburgh, PA 15253-5230

UC Health
P.O. Box 740117
Cincinnati, OH 45274

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